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**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

**Toby Washington, M.D.
8911 Northeastern Blvd., NE E101
Albuquerque, NM 87112**

**Physician's and Surgeon's
Certificate No. A 76145**

Case No. 11-2013-233669

**AGREEMENT FOR
SURRENDER OF LICENSE**

Respondent.

TO ALL PARTIES:

IT IS HEREBY STIPULATED AND AGREED by and between the parties to the
above-entitled proceedings, that the following matters are true:

1. Complainant, Kimberly Kirchmeyer, is the Executive Director of the Medical
Board of California, Department of Consumer Affairs ("Board").

2. Toby Washington, M.D., ("Respondent") has carefully read and fully
understands the effect of this Agreement.

3. Respondent understands that by signing this Agreement he is enabling the
Board to issue this order accepting the surrender of license without further process.
Respondent understands and agrees that Board staff and counsel for complainant may
communicate directly with the Board regarding this Agreement, without notice to or
participation by Respondent. The Board will not be disqualified from further action in this
matter by virtue of its consideration of this Agreement.

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1 4. Respondent acknowledges there is current disciplinary action against his
2 license, that on July 1, 2014, an Accusation was filed against him and on February 4, 2016,
3 a Decision was rendered wherein his license was revoked, with the revocation stayed, and
4 placed on five years' probation with various standard terms and conditions.

5 5. The current disciplinary action provides in pertinent part, "Following the
6 effective date of this Decision, if Respondent ceases practicing due to retirement or health
7 reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent
8 may request to surrender his or her license." (Condition #19).

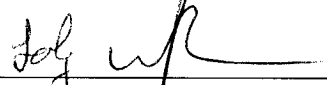
9 6. Upon acceptance of the Agreement by the Board, Respondent understands
10 he will no longer be permitted to practice as a physician and surgeon in California, and
11 also agrees to surrender his wallet certificate, wall license and D.E.A. Certificate(s).

12 7. Respondent fully understands and agrees that if Respondent ever files an
13 application for relicensure or reinstatement in the State of California, the Board shall treat
14 it as a Petition for Reinstatement of a revoked license in effect at the time the Petition is
15 filed. In addition, any Medical Board Investigation Report(s), including all referenced
16 documents and other exhibits, upon which the Board is predicated, and any such
17 Investigation Report(s), attachments, and other exhibits, that may be generated subsequent
18 to the filing of this Agreement for Surrender of License, shall be admissible as direct
19 evidence, and any time-based defenses, such as laches or any applicable statute of
20 limitations, shall be waived when the Board determines whether to grant or deny the
21 Petition.
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ACCEPTANCE

I, Toby Washington, M.D., have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician's and Surgeon's Certificate No. A 76145, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.



Toby Washington, M.D.

5/22/17

Date



Attorney or Witness

5/22/17

Date



Kimberly Kirchmeyer
Executive Director
Medical Board of California

June 7, 2017

Date

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